

Mail Stop: AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



Docket No.: 200.1133CON5
Date: December 20, 2007

In re application of: **Benjamin Oshlack, et al.**
Application No.: 10/700,906
Filed: November 4, 2003
For: **TAMPER-RESISTANT ORAL OPIOID AGONIST FORMULATIONS**

Sir:

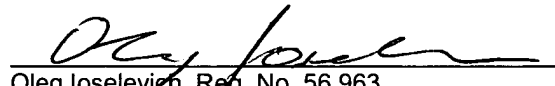
Transmitted herewith is a **Response to Office Action (13 pages)** in the above-identified application.

- ☐ Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
☐ Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.
☐ No fee for additional claims is required.
☐ A filing fee for additional claims calculated as shown below, is required:

| | | (Col. 1) | (Col. 2) | | | SMALL ENTITY | | | OR | | | LARGE ENTITY |
|--|-----------|-----------|------------|---------|---|--------------|-------|----|----|--------|--------|--------------|
| FOR: | | REMAINING | HIGHEST | | | RATE | FEE | | | RATE | FEE | |
| | AFTER | | PREVIOUSLY | PRESENT | | | | | | | | |
| | AMENDMENT | | PAID FOR | EXTRA | | | | | | | | |
| TOTAL CLAIMS | 16 | MINUS | 20 | = | 0 | x \$ | 9 | \$ | | x \$ | 18 | \$0 |
| INDEP. CLAIMS | 2 | MINUS | 3 | = | 0 | x \$ | 44 | \$ | | x \$ | 88 | \$0 |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | | | + | \$150 | \$ | | + | \$300 | \$0 |
| | | | | | | TOTAL: | \$ | | OR | TOTAL: | \$0.00 | |

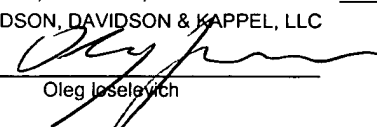
- * If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☒ Also transmitted herewith are:
☒ Petition for two (2) months extension under 37 C.F.R. 1.136
☒ Other: **Information Disclosure Statement under 37 C.F.R. §1.56 (2 pages), Form PTO-1449 (1 page) with the document cited in the Other Prior Art section and return postcard**
- ☒ Check(s) in the amount of **\$640.00** is/are attached to cover:
☐ Filing fee for additional claims under 37 C.F.R. 1.16
☒ Petition fee for two (2) months extension under 37 C.F.R. 1.136
☒ Other: **Information Disclosure Statement fee**
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.
- ☒ Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
☒ Any patent application processing fees under 37 C.F.R. 1.17.
☒ Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.


Oleg Ioselevich, Reg. No. 56,963
DAVIDSON, DAVIDSON & KAPPEL, LLC
485 Seventh Avenue, 14th Floor
New York, New York 10018
Tel: (212) 736-1940
Fax: (212) 736-2427

I hereby certify that the documents referred to as attached therein and/or transmitted herewith and/or fee(s) are being deposited with the United States Postal Service as "first class mail" with sufficient postage in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on December 20, 2007.

DAVIDSON, DAVIDSON & KAPPEL, LLC

BY: 
Oleg Ioselevich